

DP-59-A**043**

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
**PAYMENT FORM AND APPLICATION FOR 7 MONTH EXTENSION
 OF TIME TO FILE INTEREST AND DIVIDENDS TAX RETURN**

TO MAKE YOUR PAYMENT ON-LINE ACCESS E-FILE AT www.revenue.nh.gov

DO NOT FILE THIS FORM IF LINE 3 IS ZERO.

THIS IS NOT AN EXTENSION OF TIME TO PAY

FOR DRA USE ONLY

AUTOMATIC EXTENSION	If you have paid 100% of the tax determined to be due by the due date of the tax you will be granted an automatic 7-month extension to file your New Hampshire Interest and Dividends Tax return WITHOUT filing this form or a copy of your federal extension. The fastest way to make your 100% extension payment is to file on-line by accessing our web site at www.revenue.nh.gov . If you meet this requirement, you may file your New Hampshire Interest & Dividends Tax return up to 7 months beyond the original due date and you will not be subject to the late filing penalty. Please note that an extension of time to file your return is not an extension of time to pay the tax.
WHO MUST FILE	If you need to make an additional payment in order to have paid 100% of the tax determined to be due by the due date of the tax, then you must complete this form and submit with payment to be granted an extension of time to file your New Hampshire Interest and Dividends Tax return. You may also make your payment electronically by accessing our web site at www.revenue.nh.gov . Do not file this form if Net Balance Due is zero.
WHEN TO FILE	This form must be postmarked on or before the original due date of the return. Electronic payments must be received before midnight on the due date of the return.
WHERE TO FILE	New Hampshire Department of Revenue Administration, Document Processing, 45 Chenell Drive, PO Box 2072, Concord, NH 03302-2072.
REASONS FOR DENIAL	Applications for extensions will be rejected for reasons such as, but not limited to, the application was postmarked after the due date for filing the return, the payment for the balance due shown on Line 3 above did not accompany this application, or the payment was not made electronically before midnight on the due date of the return.
NEED HELP	Call Central Taxpayer Services at (603) 271-2191. Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964
STEP 1 Name and Identification Numbers	In the spaces provided below, enter the beginning and ending dates of the taxable period if different from the calendar year. Please PRINT the taxpayer's name, address, Social Security Number (SSN), Federal Employer Identification Number (FEIN), or Department Identification Number (DIN) in the spaces provided. If you have received a booklet of tax forms that are preprinted, please use that form. Enter spouse's name and SSN in the spaces provided for separate proprietorship only. Social Security Numbers are required pursuant to the authority granted by 42 U.S.C.S., Section 405. Wherever SSN's or FEIN's are required, taxpayers who have been issued a DIN, shall use their DIN only, and not SSN or FEIN.

For the CALENDAR year **2006** or other taxable period beginning _____ and ending _____
 Mo Day Year Mo Day Year

ENTITY TYPE Check one of the following: ☐ ① Individual/Joint ☐ ③ Partnership ☐ ④ Fiduciary

LAST NAME	FIRST NAME & INITIAL	SOCIAL SECURITY NUMBER
SPOUSE'S LAST NAME	FIRST NAME & INITIAL	SPOUSE'S SOCIAL SECURITY NUMBER
NAME OF PARTNERSHIP OR FIDUCIARY		FEDERAL EMPLOYER IDENTIFICATION NUMBER or DIN
NUMBER & STREET ADDRESS		DEPARTMENT IDENTIFICATION NUMBER
ADDRESS (Continued)		If required to use DIN, do not use SSN or FEIN
CITY/TOWN, STATE & ZIP CODE		

100% PAYMENT IS DUE ON OR BEFORE THE DUE DATE OF THE TAX	1 Enter 100% of the Interest and Dividend Tax determined to be due		1	
	2(a) Enter credit carried over from prior tax period and payments ... of estimated tax	2(a)		
	2(b) Enter payment made electronically, if applicable	2(b)		
FOR DRA USE ONLY	2 Total advance payments and credits [Line 2(a) plus Line 2(b)] ..		2	
	3 NET BALANCE DUE: (Line 1 minus Line 2)	PAY THIS AMOUNT →	3	

MAKE CHECK PAYABLE TO: STATE OF NEW HAMPSHIRE. ENCLOSE, BUT DO NOT STAPLE OR TAPE, YOUR PAYMENT TO THIS EXTENSION.

MAIL
TO: NH DEPT OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
PO BOX 2072
CONCORD NH 03302-2072

Go to our web site at www.revenue.nh.gov and make your payment electronically and you will not have to file this form.